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## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

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Comple	te if Known
Application Number	10/035,993
Filing Date	12/31/2001
First Named Inventor	WagmanedEIVED
Group Art Unit	2621
Examiner Name	Not Known UN 2 7 2002
Attorney Docket Number	C01-006

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Examiner Initials*	Cite No.1	U.S. Patent I	Kind Code <sup>2</sup> (il known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant . とはいろした。
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Substitute for form 1449B/PTO Complete if Known **Application Number** 10/035,993 INFORMATION DISCLOSURE Filing Date 12/31/2001 STATEMENT BY APPLICANT First Named Inventor Wagman, etc. Group Art Unit 2621 (use as many sheets as necessary) Examiner Name NO KHOWAMA heet **Attorney Docket Number** C01-006

OTHER PRIOR	ART -	NON PATENT LITERATURE DOCUMENTS				
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